

2014

CITY OF FAIRFAX, COMMISSIONER OF THE REVENUE, ROOM 224, CITY HALL • 10455 ARMSTRONG STREET, FAIRFAX, VIRGINIA 22030 • (703) 385-7880

BUSINESS RETURN OF TANGIBLE PERSONAL PROPERTY, MACHINERY AND TOOLS

Account No.

Employer I. D. No.

Nature of Business or Profession

Business Phone

Business Address if different from mailing:

Every person, business, or profession owning tangible personal property and/or machinery and tools subject to tax in the City of Fairfax, Virginia on January 1, 2014 must report same on this return and file on or before May 1, 2014 with William Page Johnson II, Commissioner of the Revenue, City Hall, Fairfax, Virginia 22030.

A penalty of ten percent of the tax otherwise assessed will be added to returns received after May 1, 2014. Postmark date governs mailed returns. WORKSHEET, LISTING ALL TANGIBLE PROPERTY OWNED, DATE ACQUIRED AND ORIGINAL COST, MUST BE ATTACHED HERETO.

IF LEASED OR RENTED PERSONAL PROPERTY WAS IN YOUR POSSESSION AS OF 1-1-2014, FURNISH NAME AND ADDRESS OF LESSOR, DESCRIPTION OF LEASED PROPERTY, DATE LEASED, AND COST ON SEPARATE SHEET.

PART 1 — ALL NON-COMPUTER PROPERTY:

ENTER BELOW THE ORIGINAL COST VALUES, NOT DEPRECIATED VALUES:

PROPERTY ACQUIRED	FURNITURE, FIXTURES & EQUIPMENT	MACHINERY & TOOLS	%	OFFICE USE ONLY
ON JAN. 1, 2014			80%	
DURING 2013			70%	
DURING 2012			60%	
DURING 2011			50%	
DURING 2010			40%	
DURING 2009			30%	
DURING 2008			20%	
DURING 2007 AND BEFORE:			10%	

PART 2 — COMPUTER EQUIPMENT *

ENTER BELOW THE ORIGINAL COST VALUES, NOT DEPRECIATED VALUES:

PROPERTY ACQUIRED	COMPUTER EQUIPMENT	%	OFFICE USE ONLY
ON JAN. 1, 2014		100%	
DURING 2013		65%	
DURING 2012		45%	
DURING 2011		30%	
DURING 2010		10%	
DURING 2009 AND BEFORE:		2%	

NOTE: IT IS A MISDEMEANOR FOR ANY PERSON WILLFULLY TO SUBSCRIBE A RETURN WHICH HE DOES NOT BELIEVE TO BE TRUE AND CORRECT AS TO EVERY MATERIAL MATTER. (CODE OF VIRGINIA, SEC. 58.1-11)

TRADE NAME
CORPORATE NAME
MAILING ADDRESS

SEE REVERSE SIDE FOR ASSESSMENT FORMULAS AND COMPLETE INSTRUCTIONS
*A SEPARATE WORKSHEET OF COMPUTER EQUIPMENT REPORTED IN PART 2 IS REQUIRED.

IF ADDRESS IS INCORRECT PLEASE CORRECT BELOW:

DECLARATION: I declare that the statements and figures herein given are true, full, and correct to the best of my knowledge and belief.

Authorized Signature

Date

Print Signature

Title

Telephone No.

RETURN ORIGINAL ONLY
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